



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-847-UF

Version Type: ORIGINAL
VERSION

Report Date: 9/3/2019 10:22 AM

Status: Submitted

Agency/Facility Information

Agency Name: Longview Police
Dept.

Agency Address: PO BOX 1952

Agency City: Longview

Agency State: TX

Agency Zip: 75606

Director Information

Director Salutation: Chief

Director First Name: Mike

Director Middle Name:

Director Last Name: Bishop

Reporter Name: Darin Lair

Reporter Email: dlair@longviewtexas.gov

Decedent Information

Identity of Deceased

First Name: Detravian

Middle Name: Devantae

Last Name: Allison

Suffix:

Date of Birth: 5/3/2001

Sex: Male

Race: Black or African
American

Age At Time Of Death: 18

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or
Incident: 8/7/2019 11:12 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 8/7/2019 12:12 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Yes, results
Evaluation?: pending

What was the manner of death? (select only one)

Manner of Death: Pending autopsy
results

Medical Cause of Death:

Medical Cause of Death:

Autopsy results are pending

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Law
enforcement/correctional
personnel

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused
death?: Handgun

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical
condition?: Not Applicable;
cause of death was
accidental injury,
intoxication, suicide
or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1600 Pine Tree Rd

City: Longview

County: Gregg

Zip: 75604

What location category best describes where the event causing the death occurred?

Location Category: Parking lot/garage

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Pre-Custodial Use
of Force

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing arrest

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ☒

Where did the death occur?

Death Location: Medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?: Yes

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Assault on Public Servant

Offense 2:

Aggravated Robbery

Offense 3:

Burglary of a Habitation

Were the Charges:: Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Violent Crime
Against Persons;
Crime Against
Property

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed firearm without discharge

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?: Yes (select all that apply)

Ways Decedent Attempted To Attempted to injure law enforcement

Injure Others: personnel

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	No
Exhibit any mental health problems?:	Unknown	Exhibit any medical problems?:	No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	No	Resist being handcuffed or arrested?:	Yes
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	Yes
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint: No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

Officers responded to a criminal trespassing call. The vehicle involved in the call had been reported as being taken in an aggravated robbery on 8/2/2019. Officers located the vehicle in the parking lot at 1600 Pine Tree Road. When officers attempted to check on the vehicle and see if it was occupied, a passenger exited and fled on foot. The driver of the vehicle exited the vehicle. The driver ignored officers' verbal commands and then pointed a handgun at the officers. The officers fired their handguns and struck the suspect. Officers rendered medical care until EMS arrived. The suspect was transported to the hospital where he was later pronounced dead.

